

Form P1

COMBINED DECLARATION and POWER OF ATTORNEY

(Utility, Design, National Stage of PCT)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

- [] utility patent application
- [] design patent application
- [X] national stage of PCT patent application

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

SURFACE MICROMACHINED MICRONEEDLES

SPECIFICATION IDENTIFICATION

the specification of which:

(a) [] is attached hereto.	No.
(b) [] was previously filed	, as United States Patent Application Serial
No	
(c) [X] was described and claimed in PCT filed on September 17, 1999.	International Application No. PCT/US99/21509

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment specifically referred to in the declaration, referred to above.



U.S. PRIORITY CLAIM (35 USC § 120)

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s) listed below, if any, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of title 35 USC § 112, I acknowledge the duty to disclose information which is material to patentability as defined in title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national filing date of this application.

UNITED STATES PARENT APPLICATION NO.	PARENT FILING DATE (day, month, year)	PARENT PATENT NO. (if applicable)
60/101,064	18 September 1998	

POWER OF ATTORNEY

I hereby appoint as my attorneys and/or patent agents all attorneys and/or patent agents listed under the following Customer Number, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:



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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

	SIGNATURE(S)	
ull name of sole or firs	st inventor	
A	Bruno [,]	Frazier
(GIVEN NAME)	MIDDLE NITIAL OR NAME)	FAMILY (OR LAST NAME)
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(GIVEN NAME)	MIDDLE INITIAL OR NAMES	FAMILY (OR LAST NAME)
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nventor's signature	With Il I meet	
2/1/21	Coupty of Citizenship	United States
Inventor's signature Date//0/ Residence <u>State of /</u> 0t	-	United States
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